

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket No.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTRONIC VOTING PROCESS USING FAIR BLIND SIGNATURES

the specification of which (check only one item below)

[] is attached hereto

[] was filed as United States application

Serial No.

Ωn

and was amended

on _ (if applicable).

[X] was filed as PCT international application

Number PCT/EP2005/002162

on February 28, 2005

and was amended under PCT Article 19

on _ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 35 U.S.C. 119	
EUROPE	04290557.0	02/03/2004	[X] YES	[] NO
			[] YES	[] NO
			[] YES	[] NO
	****		[] YES	[] NO



DATE 07/07/06

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY Attorney's Docket No. (Includes Reference to PCT International Applications) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at Cohen. Pontani, Lieberman & Pavane to prosecute this application and transact all business in the Patent and Trademark Office connected therewith Customer number Send correspondence to Cohen, Pontani, Lieberman & Pavane at the address for the Direct Telephone calls to: following customer Number: (name and telephone number) Thomas Langer (212) 687-2770 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF INVENTOR **FAMILY NAME CANARD** Sébastien 2 COUNTRY OF CITIZENSHIP RESIDENCE, CITIZENSHIP CITY STATE OR FOREIGN COUNTRY CAEN France France 0 1 STATE & ZIP CODE/COUNTRY CITY POST OFFICE ADDRESS POST OFFICE ADDRESS 15 Rue Alexandre Bigot CAEN France 14000 FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF INVENTOR FAMILY NAME **GAUD** Matthieu 2 COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY RESIDENCE, CITIZENSHIP CITY Courseulles sur Mer France France 0 2 POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS Courseulles sur Mer France 14470 18 Quai des Alliers, SECOND GIVEN NAME FIRST GIVEN NAME FULL NAME OF INVENTOR **FAMILY NAME** TRAORE Jacques 2 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE, CITIZENSHIP Saint Georges des France 0 France Groseillers 3 POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS Saint Georges des Groseillers 23 Avenue de la Suisse Normande France 61100 COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY Attorney's Docket No. (Includes Reference to PCT International Applications) SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202

DATE 07/07/06